

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN  PATENT APPLICATION</b>  <input checked="" type="checkbox"/> Declaration <input type="checkbox"/> Declaration Submitted with      Submitted after Initial Initial Filing      Filing (surcharge 37 CFR 1.16(e) required)	Attorney Docket No.	TES-002
	First Named Inventor	Dyl
	<b>COMPLETE IF KNOWN</b>	
	Application Serial Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Efficient Method for Providing Game Content to a Client

*(Title of the Invention)*

the specification of which

☒ is attached hereto  
OR  
☐ was filed on  as United States Application Serial Number or PCT International (MM/DD/YYYY)

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information known by me which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.

## Declaration and Power of Attorney for Utility or Design Patent Application

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**DECLARATION – Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c), of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below



Place Customer  
Number Bar Code  
Label Here

	Registration Number	Name	Registration Number
Andrew F. Abramson	P-52,538	Ira V. Heffan	41,059
Steven M. Bauer	31,481	Douglas J. Kline	35,574
Mark L. Beloborodov	50,773	John D. Lanza	40,060
John V. Bianco	36,748	Leigh J. Martinson	50,749
Robert S. Blasi	50,389	William A. Meunier	41,193
Michael H. Brodowski	41,640	Thomas C. Meyers	36,989
Jennifer A. Camacho	43,526	Ronda P. Moore	44,244
Joseph A. Capraro, Jr.	36,471	Jeremy Occek	50,794
Fangli Chen	P-51,551	Jamie H. Rose	45,054
Christopher H. Chung	50,351	Christopher W. Stamos	35,370
John J. Cotter	38,116	Diana M. Steel	43,153
James C. DeVellis	P-52,814	Robert J. Tosti	35,393
Robert V. Donahoe	46,667	Thomas A. Turano	35,722
Brian A. Fairchild	48,645	Natasha C. Us	44,381
Jason P. Fiorillo	P-52,892	Christine C. Vito	39,061
John V. Forcier	42,545	Patrick R.H. Waller	41,418
Steven J. Frank	33,497	Daniel A. Wilson	45,508
Kia L. Freeman	47,577	Gerald E. Worth	45,238
Christopher J. Frerking	42,557	Yin P. Zhang	44,372
Brian M. Gaff	44,691	Stephanie M. Zierten	52,397
Jennifer E. Grant	51,752		
Duncan A. Greenhalgh	38,678		
William R. Haulbrook	53,002		
<input type="checkbox"/> Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.			

Direct all correspondence to:

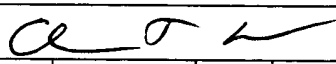
Patent Administrator  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110  
Tel. No.: (617) 248-7000  
Fax No.: (617) 248-7100

## Declaration and Power of Attorney for Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])					Family Name or Surname					
Christopher J.					Dyl					
Inventor's Signature							Date			
Residence		City	Rehoboth	State	MA	Country	USA	Citizenship	USA	
Mailing Address		191 Agricultural Avenue								
Mailing Address (ln. 2)		City	Rehoboth	State	MA	ZIP	02769	Country	USA	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.										
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])					Family Name or Surname					
xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx					xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx					
Inventor's Signature		xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx					Date		xxxxxxxxxxxxxx	
Residence		City	xxxxx	State	xxxxx	Country	xxxxxxx	Citizenship	xxxxxxx	
Mailing Address		xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx								
Mailing Address (ln. 2)		City	xxxxxxx	State	xxxx	ZIP	xxxxx	Country	xxxxxxx	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])					Family Name or Surname					
Inventor's Signature							Date			
Residence		City		State		Country		Citizenship		
Mailing Address										
Mailing Address (ln. 2)		City		State		ZIP		Country		
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])					Family Name or Surname					
Inventor's Signature							Date			
Residence		City		State		Country	USA	Citizenship		
Mailing Address										
Mailing Address (ln. 2)		City		State		ZIP		Country		

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